ees. SUBMIT: COMPLETED APPLICATION, TAX APPLICATION FOR PERMIT Permit #: 8-0346 STATEMENT AND FEE TO: **BAYFIELD COUNTY, WISCONSIN Bayfield County** Date: 9-5-18 Planning and Zoning Depart. Date Stamp (Received) **Amount Paid:** \$1,000 PO Box 58 Washburn, WI 54891 ENTERED 8-24-18 (715) 373-6138 AUG 2 2 2018 Refund: INSTRUCTIONS: No permits will be issued until all fees are paid. Bayfield Co. Zoning Dept Checks are made payable to: Bayfield County Zoning Department. VE BEEN ISSUED TO APPLICANT. FILL OUT IN INK (NO PENCIL) O NOT START CONSTRUCTION UNTIL ALL PE ☐ SPECIAL USE ☐ B.O.A. □ OTHER X LAND USE ☐ SANITARY □ PRIVY **CONDITIONAL USE** TYPE OF PERMIT REQUESTED-Telephone: 218 341 0552 Jeru Mailing Address: City/State/Zip: Owner's Name: Bett Lou K. Cell Phone: River -205-1783 Contractor Phone: Contractor: -590-4598 Superior Written Authorization Agent Phone: Agent Mailing Address (include City/State/Zip): Authorized Agent: (Person Signing App Attached □ Yes □ No Recorded Document: (Showing 2011 R - 536539 1 Tax ID# 1054 PROJECT Legal Description: (Use Tax Statement) 3000 B LOCATION Gov't Lot Lot(s) Vol & Page CSM Doc# Lot(s) No. Block(s) No. 980,42 1/4 Z 18,19,20 2 Town of: N, Range <u>08</u> , Township  $\underline{\mathsf{U}}$ ☐ Is Property/Land within 300 feet of River, Stream (incl. Intermittent) Distance Structure is from Shoreline: Is Property in re Wetlands Creek or Landward side of Floodplain? feet loodplain Zone If yes resent? □ Shoreland Yes Yes Distance Structure is from Shoreline : Vis Property/Land within 1000 feet of Lake, Pond or Flowage No No No If yes---continue ■ Non-Shoreland Value at Time # of Type of What Type of of Completion bedrooms Water Sewer/Sanitary System Foundation **Project** # of Stories include in on Is on the property? donated time & property structure material ☐ City **Basement** □ 1 ☐ Municipal/City X New Construction 1-Story (New) Sanitary Specify Type: Well × 2 □ Addition/Alteration 1-Story + Loft Foundation \$ 300,000 □ 3 Sanitary (Exists) Specify Type: Conversion 2-Story  $\ \square$  Privy (Pit) or  $\ \square$  Vaulted (min 200 gallon) ☐ Relocate (existing bldg) ☐ Run a Business on Portable (w/service contract) Use None **Compost Toilet** Year Round Property None Width: Height: Existing Structure: (if permit being applied for is relevant to it) Length: Width: **Proposed Construction:** Square **Dimensions Proposed Structure Proposed Use** Footage Principal Structure (first structure on property) 33 x 4 408 Residence (i.e. cabin, hunting shack, etc.) 1 with Loft Residential Use with a Porch with (2<sup>nd</sup>) Porch X Х with a Deck ( ) X ) with (2<sup>nd</sup>) Deck 126 Х ) 98 ☐ Commercial Use with Attached Garage X ( **Bunkhouse** w/ ( $\square$  sanitary, or  $\square$  sleeping quarters, or  $\square$  cooking & food prep facilities) X Mobile Home (manufactured date) ( Х ( ) Addition/Alteration (specify) ☐ Municipal Use X ) ( Accessory Building (specify) X ) Accessory Building Addition/Alteration (specify) Х ) Special Use: (explain) Х ) ( Conditional Use: (explain) X ) Other: (explain) FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection. NO Selh -0 Owner(s): (If there are Multiple Owner ed on the Deed All Owners must sign or letter(s) of authorization must accompany this application) Date **Authorized Agent:** (If you are signing on behalf of the owner(s) a letter of authorization must accompany this application) Iron River Copy of Tax Statement

**Proposed Construction** 

Fill Out in Ink - NO PENCIL

Show Location of:

Show / Indicate:

North (N) on Plot Plan

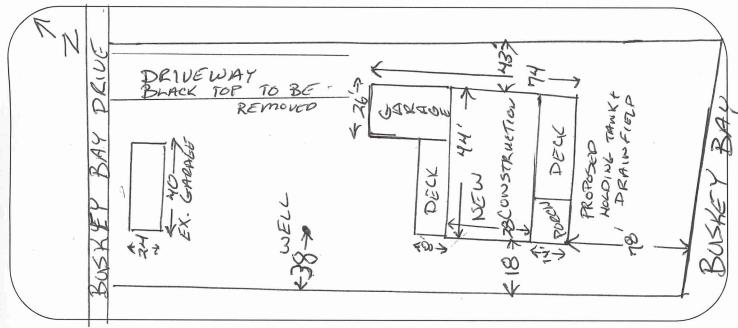
Show Location of (\*): (\*) Driveway and (\*) Frontage Road (Name Frontage Road)

(4) Show: All Existing Structures on your Property

(\*) Well (W); (\*) Septic Tank (ST); (\*) Drain Field (DF); (\*) Holding Tank (HT) and/or (\*) Privy (P) (5) Show:

(\*) Lake; (\*) River; (\*) Stream/Creek; or (\*) Pond (\*) Wetlands; or (\*) Slopes over 20% (6)Show any (\*):

Show any (\*): (7)



Please complete (1) – (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

Description	Measurement			Description	Measurement	
				<u> </u>	-	
Setback from the <b>Centerline of Platted Road</b>	205	Feet		Setback from the <b>Lake</b> (ordinary high-water mark)	78	Feet
Setback from the Established Right-of-Way	175	Feet		Setback from the River, Stream, Creek		Feet
				Setback from the Bank or Bluff		Feet
Setback from the <b>North</b> Lot Line	175	Feet				
Setback from the <b>South</b> Lot Line	78	Feet		Setback from Wetland		Feet
Setback from the <b>West</b> Lot Line	18	Feet		20% Slope Area on the property	☐ Yes	×Nο
Setback from the <b>East</b> Lot Line	43	Feet		Elevation of <b>Floodplain</b>		Feet
Setback to Septic Tank or Holding Tank	70	Feet		Setback to <b>Well</b>	28	Feet
Setback to <b>Drain Field</b>	69	Feet				0, 32-392
Setback to <b>Privy</b> (Portable, Composting)	1	Feet	F)			

other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code. The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)	Sanitary Number:	8-765	# of bedrooms:	Sanitary Date:	8/9/18		
Permit Denied (Date):	Reason for Denial:						
Permit #: 18-0346	Permit Date: 9-5	18					
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming    Yes   Deed of Record	ous Lot(s)) No	Mitigation Required Mitigation Attached	☐ Yes No☐ Yes No	Affidavit Required Affidavit Attached	☐ Yes ☐ No☐ Yes ☐ No☐ No☐ No☐ No☐ No☐ No☐ No☐ No☐ No☐ N		
Granted by Variance (B.O.A.)  ☐ Yes No Case #:		Previously Granted by  See No	y Variance (B.O.A.) Case	e #:			
Was Parcel Legally Created Was Proposed Building Site Delineated  ★Yes □ No	Stakes	Were Property Line	es Represented by Owner Was Property Surveyed		□ No		
Property lives were well-marked compliant.	proposed house Idetermined by	e was well st survey. Project	aked, appears to de	Zoning District Lakes Classificatio	(R1) n(1 Buskey 8		
Date of Inspection: 8 29 18			Date of Re-Inspection:				
Condition(s): Town, Committee or Board Conditions Attached?   Yes   No - (If No they need to be attached.)  Must obtain a Uniform Dwelling Code (UDC) permit from the locally contracted UDC agency  Prior to Starting Construction, must meet and maintain set backs,							
Signature of Inspector: wood Norwood				Date of Appro	val: 8/30/(8		
Hold For Sanitary: 🗆 Hold For TBA: 🗆 _	Hold For Affi	davit: 🔲	Hold For Fees:				

### village, State or Federal May Also Be Required

OUSE - X ANITARY - 18-76S SIGN -SPECIAL -CONDITIONAL -BOA -

# **BAYFIELD COUNTY** PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

**Betty Nelson - Lahti** Issued To: 18-0346 No. Town of Iron River Range 8 W. 47 Township 28 Section Location:  $\frac{1}{4}$  of Subdivision Pike Lake Park CSM# Block 19 Lot Gov't Lot

For: Residential Use: [ 1- Story; Residence (32' x 44') = 1,408 sq. ft.; Porch (14' x 16') = 224 sq. ft.;

<u>Deck #1</u>  $(14' \times 28') = 392 \text{ sq. ft.}$ ; <u>Deck #2</u>  $(8' \times 18') = 144 \text{ sq. ft.}$ ;

Attached Garage (26' x 28') = 728 sq. ft. ] Total Overall = 2,168 sq. ft.

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): A UDC permit from the locally contracted UDC inspection agency must be obtained prior to the start of construction. Must meet and maintain setbacks.

NOTE: This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

> Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not

**Todd Norwood** 

Authorized Issuing Official

September 5, 2018

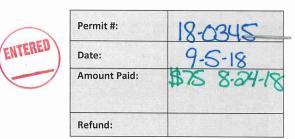
Date

SURMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

**Bayfield County** Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

#### **APPLICATION FOR PERMIT** BAYFIELD COUNTY, WISCONSIN





INSTRUCTIONS: No permits will be issued until all fees are paid.

Checks are made pay DO NOT START CONS								FILL OU	TININK (NO	PENCIL)		
TYPE OF PERMIT REQUESTED → LAND USE □ SANITARY □ PRIVY □ CONDITIONAL USE □ SPECIAL USE □ B.O.A. □ OTHER												
Owner's Name:	211	6	Ben	eke	Mailin	Long L	485 City	/State/Zip: Tyon Re	,WI		one:	
Address of Property:						State/Zip:	0	in the	5,489	Cell Pho	one: 582	
LUCKY 3/11/10 646 372-0055												
Authorized Agent (Person Signing Application on behalf of Owner(s))  Agent Phone:  Agent Mailing Address (include City/State/Zip):  Written Authorization  Attached  Yes □ No												
PROJECT LOCATION  Legal Description: (Use Tax Statement)  19259  Recorded Document: (Showing Ownership) 2017 R 571 33 1												
1/4,1/4 Gov't Lot Lot(s) CSM Vol & Page CSM Doc # Lot(s) No. Block(s) No. Subdivision:												
Section//	, Towi	nship _	47 <sub>N,R</sub>	ange 8 W	J	Town of:  Iron	Riz	ier	Lot Size	Acrea	37	
		-		n 300 feet of Rive		eam (incl. Intermittent)	Distance Stru	ucture is from Shorelin	is Pi	operty in	Are Wetlands	
Shoreland —				1000 feet of Lak	ke, Pon	nd or Flowage	Distance Stru	ucture, is from Shorelin	the second secon			
☐ Non-Shoreland	F				іт ус	escontinue>		<i>50</i>	feet	No	2-No	
								1				
Value at Time of Completion							# of bedrooms	Wh	at Type of		Type of	
* include donated time &		Proje	ct	# of Stories		Foundation	in structure		Sanitary System the property?		Water on property	
material	Nev	v Const	ruction	1-Story		☐ Basement		☐ Municipal/City			☐ City	
\$ 21/1			Alteration	☐ 1-Story + L	Loft	☐ Foundation	□ 2	□ (New) Sanitary Specify Type:     ☐ Sanitary (Exists) Specify Type:     ☐ Privy (Pit) or □ Vaulted (min 200 gallon)			XWell	
3461		versior	n xisting bldg)	2-Story		* Sandlemul	□ 3				lon)	
			ness on			Use	y None	vice contract)				
-	·	perty				Year Round		☐ Compost Toilet	3			
- 1												
Existing Structure Proposed Constru	e: (if per	mit beir	ng applied fo	r is relevant to it)	)	Length:	24	Width:		Height:	10	
Proposed Constru	e: (if per uction:		ng applied fo	r is relevant to it)		Length:		Width:		Height:	Square	
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Proposed Constru	e: (if per uction:		Principal	<b>Structure</b> (first	struc	Length: Length: Proposed Structur ture on property)		Width:	Dimens ( X	Height:		
Proposed Constru	e: (if per uction:	<b>✓</b>	Principal		struc	Length: Length: Proposed Structur ture on property)		Width:	Dimens	Height:		
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Proposed Construence Proposed Use Residential Use Commercial I (we) declare that this al (are) responsible for the result of Bayfield County property at any reasons Owner(s): (If there are Multical Authorized Agent:	e: (if per uction:  Be Use  Use  Use  Use  Use  Use  Use  Use	including an accuracy of this inform the purpose listed on are significant.	Bunkhous Mobile He Addition/ Accessory Special Us Condition Other: (ex FAILURE TO my accompanying all information I (we) am se of inspection.	Structure (first e (i.e. cabin, hur with Loft with a Porch with (2 <sup>nd</sup> ) Po with a Deck with (2 <sup>nd</sup> ) De with Attache se w/ ( sanitary ome (manufactur / Alteration (sper / Building Addit se: (explain)	t struct nting s  norch eck ed Gar y, or  cred dat ecify) ecify) tion/A  n examine g and the ith this ap ign or le	Length: Length: Length: Proposed Structur ture on property) shack, etc.)  rage sleeping quarters, te)  Ling Construction we do by me (us) and to the beat it will be relied upon by B pplication. I (we) consent to	or Cooking 8  THOUT A PERMI st of my (our) knowl ayfield County in de county officials cha	Width:  Width:	Dimens  ( X ( X ( X ( X ( X ( X ( X ( X ( X (	deight:  fons  )  )  )  )  )  )  )  )  )  )  )  )  )	ige that I (we) am ty which may be a e above described	

Please complete (1) – (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Description	Measurement			Description	Measurement	
Setback from the <b>Centerline of Platted Road</b>	316	Feet		Setback from the <b>Lake</b> (ordinary high-water mark)	685	Feet
Setback from the Established Right-of-Way	280	Feet		Setback from the River, Stream, Creek		Feet
				Setback from the Bank or Bluff		Feet
Setback from the <b>North</b> Lot Line	870	Feet				
Setback from the <b>South</b> Lot Line	432	Feet		Setback from Wetland		Feet
Setback from the <b>West</b> Lot Line	394	Feet		20% Slope Area on the property	☐ Yes	□No
Setback from the <b>East</b> Lot Line	973	Feet		Elevation of <b>Floodplain</b>		Feet
Setback to Septic Tank or Holding Tank	225	Feet		Setback to <b>Well</b>	130	Feet
Setback to <b>Drain Field</b>	250	Feet			150	1000
Setback to Privy (Portable, Composting)		Feet				

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use On	Sanitary Number:	327359	# of bedrooms: 2	Sanitary Date: 8/3, /99				
Permit Denied (Date):								
Permit#: 18-0345	Permit Date: 9-5	5-18						
Is Parcel in Common Ownership	d of Record)	Mitigation Required	☐ Yes 🎽 No ☐ Yes 🗽 No	Affidavit Required ☐ Yes   ☑ No Affidavit Attached ☐ Yes   ☑ No				
Granted by Variance (B.O.A.)  ☐ Yes  No Case #:		Previously Granted by  Ves No	Previously Granted by Variance (B.O.A.)  ☐ Yes ✓ No Case #:					
Was Proposed Building Site Delineated Ye	es 🗆 No	Were Property Line	☐ Yes No ☐ No					
Inspection Record: Landowner Present Conducted at time	t and ground leveling of inspection. Project	at project site of appeals lode	was being compliant	Zoning District (RQ)  Lakes Classification (3 Hicks)				
Date of Inspection: 8/29/18	Inspected by:	SCI LADADADA		Date of Re-Inspection:				
Condition(s): Town, Committee or Board Conditions Attached? Yes No-(If No they need to be attached.)  Structure Shall not be used for human hab. Fation of Sleeping purposes. No press 11, zad  Walk in structure. Must meet and maintain set backs.								
Signature of Inspector: Told Norwo	rd	STATE		Date of Approval: 8/30/18				
Hold For Sanitary:  Hold For TBA	A: Hold For Af	ffidavit: 🗆	Hold For Fees: 🗌					

ky, Village, State or Federal May Also Be Required

AND USE - X SANITARY -SIGN -SPECIAL -CONDITIONAL -BOA -

## **BAYFIELD COUNTY** PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

No.

18-0345

Issued To:

Karen Beneke

That part of

Location:

SW 1/4 of NW 1/4 Section Lying N of cntr Ln E Long Lake Rd

Township

47

Range 8

Town of **Iron River** 

Gov't Lot

Lot

Block

Subdivision

CSM#

For: Residential Accessory Structure: [ 1- Story; Carport (24' x 20') = 480 sq. ft. ]

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Structure shall not be used for human habitation / sleeping purposes. No pressurized water in structure without an approved connection to POWTS. Must meet and maintain setbacks.

NOTE:

This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete. This permit may be void or revoked if any performance conditions are not

completed or if any prohibitory conditions are violated.

### **Todd Norwood**

**Authorized Issuing Official** 

September 5, 2018

Date